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| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | =                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | Chapter 7                       |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| t 1:                         | Identify Yourself   |  |   |
|------------------------------|---|--|---|
|                              |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |
| You                          | r full name   |  |   |
| your<br>pictu<br>exar        | government-issued<br>ire identification (for<br>nple, your driver's | Aubrey First name L.   | First name  |
| licen                        | se or passpoπ).   | Middle name  | Middle name   |
| iden                         | tification to your  | Smith  Last name and Suffix (Sr., Jr., II, III)  | Last name and Suffix (Sr., Jr., II, III)  |
|                              |   |  |   |
|                              |   |  |   |
| youi<br>num<br>Indiv<br>Iden | Social Security ber or federal vidual Taxpayer tification number    | xxx-xx-5250  |   |
|                              | Your Write your picture exar licen Bring iden mee                   | Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | About Debtor 1:  Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Smith Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  xxx-xx-5250 |

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Case number (if known)

Debtor 1 Aubrey L. Smith

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Include trade names and Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 412 South Scoville 3W Oak Park, IL 60302 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, I have lived in this district longer than in any have lived in this district longer than in any other district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Aubrey L. Smith

| Par | t 2: Tell the Court About   | Your I     | Bankruptcy Ca                                      | se   |  |   |  |
|-----|---|------------|--|--|--|---|--|
| 7.  | The chapter of the Bankruptcy Code you are  |            |  |  | of each, see <i>Notice Required</i> page 1 and check the appro   | d by 11 U.S.C. § 342(b) for Individuals Fi<br>priate box.   | ling for Bankruptcy                                |
|     | choosing to file under  |            | Chapter 7  |  |  |   |  |
|     |   |            | Chapter 11   |  |  |   |  |
|     |   |            | Chapter 12   |  |  |   |  |
|     |   |            | Chapter 13   |  |  |   |  |
| 3.  | How you will pay the fee  | •          | about how yo                                       | u may pay. Typ<br>attorney is subn                       | ically, if you are paying the fe   | check with the clerk's office in your local<br>ee yourself, you may pay with cash, cash<br>behalf, your attorney may pay with a cre   | ier's check, or money                              |
|     |   |            |  |  | allments. If you choose this (Official Form 103A).   | option, sign and attach the Application for   | or Individuals to Pay                              |
|     |   |            | I request that<br>but is not req<br>applies to you | t my fee be wa<br>uired to, waive y<br>ur family size an | ived (You may request this control of the control o | option only if you are filing for Chapter 7. if your income is less than 150% of the offee in installments). If you choose this op (Official Form 103B) and file it with your p | official poverty line that tion, you must fill out |
|     | Have you filed for  |            |  |  |  |   |  |
|     | bankruptcy within the   | ■ N        |  |  |  |   |  |
|     | last 8 years?   | ΠY         |  |  | 100  |   |  |
|     |   |            | District   |  |  |   |  |
|     |   |            | District   |  | When   |   |  |
|     |   |            | District   |  | When   | Case number   |  |
| 10. | Are any bankruptcy cases pending or being   | ■ N        | lo   |  |  |   |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ΠY         | es.  |  |  |   |  |
|     |   |            | Debtor   |  |  | Relationship to you   |  |
|     |   |            | District   |  | When   | Case number, if knowr   | 1  |
|     |   |            | Debtor   |  |  | Relationship to you   |  |
|     |   |            | District   |  | When   | Case number, if knowr   |  |
| 11. | Do you rent your  |            | lo. Go to I  | ne 12.   |  |   |  |
|     | residence?  | <b>■</b> Y | es. Has yo   | ur landlord obta   | ined an eviction judgment ag   | gainst you and do you want to stay in you   | ır residence?                                      |
|     |   |            | ■  | No. Go to line   | 12.  |   |  |
|     |   |            | _  |  | itial Statement About an Evic  | tion Judgment Against You (Form 101A)   | and file it with this                              |

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Document Page 4 of 47 Case number (if known) Debtor 1 Aubrey L. Smith Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Aubrey L. Smith

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Case number (if known)

\_\_\_\_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credi | t |
|---|---|
| counseling because of:                              |   |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb  | tor 1 Aubrey L. Smith   |  | Document   | - 1 age 0 01 47  | Case number (if kn   | own)  |
|------|---|--|--|--|--|---|
| Part | 6: Answer These Quest   | ions for Rep   | oorting Purposes   |  |  |   |
| 16.  | What kind of debts do you have?   |  | Are your debts primarily consundividual primarily for a personal   |  |  | n 11 U.S.C. § 101(8) as "incurred by an   |
|      |   | [  | ☐ No. Go to line 16b.  |  |  |   |
|      |   | I  | Yes. Go to line 17.  |  |  |   |
|      |   |  | Are your debts primarily busing noney for a business or investme   |  |  |   |
|      |   | [  | ☐ No. Go to line 16c.  |  |  |   |
|      |   | [  | Yes. Go to line 17.  |  |  |   |
|      |   | 16c. S   | State the type of debts you owe the  | hat are not consumer deb   | ots or business deb  | ots   |
| 17.  | Are you filing under<br>Chapter 7?  | □ No. I  | am not filing under Chapter 7. G   | to to line 18.   |  |   |
|      | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | — 163.<br>[  | am filing under Chapter 7. Do yo<br>are paid that funds will be availab<br>■ No<br>□ Yes   |  |  | s excluded and administrative expenses  |
| 18.  | How many Creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  |  | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000  |  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |
| 19.  | How much do you estimate your assets to be worth?   | □ \$100,00   | 0,000<br>- \$100,000<br>11 - \$500,000<br>11 - \$1 million   | □ \$1,000,001 - \$10 m □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50   | million<br>) million   | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion   |
| 20.  | How much do you estimate your liabilities to be?  | <b>\$100,00</b>  | 0,000<br>1 - \$100,000<br>11 - \$500,000<br>11 - \$1 million   | □ \$1,000,001 - \$10 m □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50   | million<br>) million   | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion   |
| Part | :7: Sign Below  |  |  |  |  |   |
| For  | you   | If I have ch<br>United Stat<br>If no attorn<br>document,<br>I request re<br>I understar<br>bankruptcy<br>and 3571. | res Code. I understand the relief ey represents me and I did not p I have obtained and read the not elief in accordance with the chapt and making a false statement, con case can result in fines up to \$2  y L. Smith Smith The Debtor 1 | m aware that I may proce available under each cha ay or agree to pay someotice required by 11 U.S.C ter of title 11, United State cealing property, or obtain 150,000, or imprisonment | ed, if eligible, unde apter, and I choose one who is not an a . § 342(b).  es Code, specified ning money or prop | or Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.  Attorney to help me fill out this in this petition.  Deerty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519, |

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Debtor 1 Aubrey L. Smith Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Chad N          | /l. Hayward              | Date          | September 1, 2017        |
|---------------------|--------------------------|---------------|--------------------------|
| Signature of        | f Attorney for Debtor    |               | MM / DD / YYYY           |
| Chad M. H           | layward                  |               |                          |
| Chad M. H           | layward                  |               |                          |
| Firm name 50 S Main |                          |               |                          |
| Ste. 200            |                          |               |                          |
| Naperville          | e, IL 60540              |               |                          |
| Number, Street,     | , City, State & ZIP Code |               |                          |
| Contact phone       | 312-867-3640             | Email address | ch@haywardlawoffices.com |
| 6280182             |                          |               |                          |
| Bar number & S      | State                    |               | <del></del>              |

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|  |                          | DUCUIII           | THE TAGE OF THE |  |  |  |
|--|--------------------------|-------------------|-----------------|--|--|--|
| ill in this information to identify your case: |                          |                   |                 |  |  |  |
| Debtor 1                                       | Aubrey L. Smith          |                   |                 |  |  |  |
|  | First Name               | Middle Name       | Last Name       |  |  |  |
| Debtor 2                                       |                          |                   |                 |  |  |  |
| Spouse if, filing)                             | First Name               | Middle Name       | Last Name       |  |  |  |
| United States Ba                               | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |  |  |  |
| Case number _                                  |                          |                   |                 |  |  |  |

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|     |  |            | assets<br>of what you own |
|-----|--|------------|---------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$         | 0.00                      |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$         | 15,250.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$         | 15,250.00                 |
| Pai | t 2: Summarize Your Liabilities  |            |                           |
|     |  |            | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$         | 21,232.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$         | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$         | 142,028.00                |
|     | Your total liabilities   | \$         | 163,260.00                |
| Paı | t 3: Summarize Your Income and Expenses  |            |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$         | 3,777.92                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$         | 3,728.00                  |
| Paı | t 4: Answer These Questions for Administrative and Statistical Records   |            |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | r other sc | hedules.                  |
| 7.  | ■ Yes What kind of debt do you have?   |            |                           |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Aubrey L. Smith

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |    |
|----|--|----|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ |

4,799.24

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | ıim  |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

Case 17-26494 Doc 1 Filed 09/01/17 Entered 09/01/17 17:35:04 Desc Main Document Page 10 of 47 Fill in this information to identify your case and this filing: Debtor 1 Aubrey L. Smith Middle Name First Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **Fusion** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2016 Debtor 2 only Current value of the Current value of the 9.800 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$11,950.00 \$11,950.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,950.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| Debtor 1                  | Document Page 11 of 47  Aubrey L. Smith  Case 17-26494 Doc 1 Filed 09/01/17 Efficied 09/01/17 17:35:04  Document Page 11 of 47  Case number (if known)  |                                   |
|---------------------------|---|-----------------------------------|
| ■ Yes                     | s. Describe   |                                   |
|                           | Living room set, Bedroom set, dining room set   | \$300.00                          |
| □ No                      | <ul> <li>conics</li> <li>coles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games</li> <li>d. Describe</li> <li>2 televisions, dvd player, computer (laptop), smart phone</li> </ul> | c collections; electronic devices |
| Exam <sub>l</sub> ■ No    | tibles of value  bles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co  other collections, memorabilia, collectibles  | in, or baseball card collections; |
| Exam <sub>l</sub><br>■ No | ment for sports and hobbies  oles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments  s. Describe   | s and kayaks; carpentry tools;    |
| ■ No                      | rms inples: Pistols, rifles, shotguns, ammunition, and related equipment is. Describe   |                                   |
| □ No                      | es  nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  b. Describe  |                                   |
|                           | Clothes   | \$200.00                          |
| ■ No                      | Iry nples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems b. Describe  | , gold, silver                    |
| Exan                      | rarm animals nples: Dogs, cats, birds, horses s. Describe   |                                   |
| ■ No                      | other personal and household items you did not already list, including any health aids you did not list s. Give specific information  |                                   |
|                           | I the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here   | \$1,000.00                        |
|                           | escribe Your Financial Assets own or have any legal or equitable interest in any of the following?  | Current value of the              |
| Do you c                  | min of have any regal of equitable interest in any of the following?  | nortion you own?                  |

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Case 17-26494 Doc 1 Filed 09/01/17 Entered 09/01/17 17:35:04 Desc Main Document Page 12 of 47 Case number (if known) Debtor 1 Aubrey L. Smith 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase \$2,300.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). □ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ■ Yes..... **Chicago Teacher's Pension** \$0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Schedule A/B: Property

■ No

☐ Yes. Give specific information about them...

|    |                 | Case 17-26494   | Doc 1          | Filed 09/01/17<br>Document | Entered 09/01/17 17:35:04<br>Page 13 of 47                  | Desc Main  |
|----|-----------------|---|----------------|----------------------------|---|--|
| De | btor 1          | Aubrey L. Smith   |                | Boodinent                  | Case number (if known)                                      |  |
|    | Example ■ No    | es, franchises, and other les: Building permits, exclu  | sive licenses  |                            | n holdings, liquor licenses, professional licens            | es   |
| Мс | ney or p        | property owed to you?   |                |                            |   | Current value of the   |
|    | ,               | ,,  |                |                            |   | portion you own? Do not deduct secured claims or exemptions. |
|    | ■ No            | unds owed to you  Give specific information ab  | oout them, inc | luding whether you alre    | ady filed the returns and the tax years                     |  |
|    | ■ No            |   | ,,,,           | usal support, child suppo  | ort, maintenance, divorce settlement, property              | settlement   |
|    | Example ■ No    | mounts someone owes y<br>les: Unpaid wages, disabili<br>benefits; unpaid loans<br>Give specific information | ty insurance p |                            | efits, sick pay, vacation pay, workers' comper              | nsation, Social Security                                     |
|    | Exampi<br>■ No  | Name the insurance compa  |                |                            | HSA); credit, homeowner's, or renter's insurar Beneficiary: | nce<br>Surrender or refund<br>value:                         |
|    | If you a someor | erest in property that is done the beneficiary of a living the has died.  Give specific information         |                |                            | ed<br>surance policy, or are currently entitled to rece     | eive property because  |
|    | Example ■ No    | against third parties, who les: Accidents, employmen Describe each claim                                    |                |                            | it or made a demand for payment<br>s to sue                 |  |
|    | ■ No            | ontingent and unliquidat  | ed claims of   | every nature, includin     | g counterclaims of the debtor and rights to                 | set off claims   |
|    | ■ No            | ancial assets you did not Give specific information   | already list   |                            |   |  |
| 36 |                 | -   |                | ,                          | ny entries for pages you have attached                      | \$2,300.00   |
| Pa | rt 5: Des       | cribe Any Business-Related  | Property You   | Own or Have an Interest    | In. List any real estate in Part 1.                         |  |
| 37 | Do vou o        | wn or have any legal or equi  | table interest | n any husiness-related n   | ronerty?  |  |
| _  | No. Go          | , , ,   | Labic IIIGIGS  | any basiness-related p     | · oporty ·  |  |
| _  | _               | o to line 38.   |                |                            |   |  |

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Case number (if known) Document Debtor 1 Aubrey L. Smith Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$11,950.00 57. Part 3: Total personal and household items, line 15 \$1,000.00 58. Part 4: Total financial assets, line 36 \$2,300.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$15,250.00

Copy personal property total

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Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

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\$15,250.00

\$15,250.00

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|                     |                          | Doddiic           | 11 1 440 10 01 7 |                                    |
|---------------------|--------------------------|-------------------|------------------|------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |                                    |
| Debtor 1            | Aubrey L. Smith          |                   |                  |                                    |
|                     | First Name               | Middle Name       | Last Name        |                                    |
| Debtor 2            |                          |                   |                  |                                    |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |                                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                                    |
| Case number         |                          |                   |                  |                                    |
| (if known)          |                          |                   |                  | Check if this is an amended filing |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | Claim as | Exempt |
|---------|----------|---------|-----------|----------|--------|
|---------|----------|---------|-----------|----------|--------|

| <ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing with</li> </ol> | . W | Vhich set of exem | ptions are vou claimi | ıa? | Check one only | . even if | vour spouse | is filina | with v | oυ. |
|--|-----|-------------------|-----------------------|-----|----------------|-----------|-------------|-----------|--------|-----|
|--|-----|-------------------|-----------------------|-----|----------------|-----------|-------------|-----------|--------|-----|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own  Copy the value from Schedule A/B | ount of the exemption you claim   | Specific laws that allow exemption |
|--|--|---|------------------------------------|
| Living room set, Bedroom set, dining room set Line from Schedule A/B: 6.1              | \$300.00   | \$300.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)              |
| 2 televisions, dvd player, computer (laptop), smart phone Line from Schedule A/B: 7.1  | \$500.00   | \$500.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)              |
| Clothes Line from Schedule A/B: 11.1   | \$200.00   | \$200.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(a)              |
| Checking: Chase Line from Schedule A/B: 17.1   | \$2,300.00   | \$2,300.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| Chicago Teacher's Pension<br>Line from Schedule A/B: 24.1                              | \$0.00   | \$0.00  100% of fair market value, up to any applicable statutory limit     | 40 ILCS 5/16-190, 5/17-151         |

Filed 09/01/17 Desc Main Case 17-26494 Entered 09/01/17 17:35:04 Document Page 16 of 47 Debtor 1 Aubrey L. Smith Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Doc 1

Yes

|                         | Case  | e 17-26494                                 | Doc 1                | Filed 09/01/17<br>Document  | <sup>7</sup> Entered<br>Page 17 | l 09/01/17 17:3<br>of 47                               | 35:04 [                    | Desc M  | 1ain              |
|-------------------------|---|--|----------------------|---|---------------------------------|--|----------------------------|---------|-------------------|
| Fill i                  | n this informat   | tion to identify you                       | r case:              |   |                                 |  |                            |         |                   |
| Debt                    | or 1  | Aubrey L. Smith                            | <b>)</b>             |   |                                 |  |                            |         |                   |
|                         | -   | First Name                                 |                      | Idle Name   | Last Name                       |  |                            |         |                   |
| Debt                    |   |  |                      |   |                                 |  |                            |         |                   |
| (Spou                   | se if, filing)  | First Name                                 | Mid                  | Idle Name   | Last Name                       |  |                            |         |                   |
| Unite                   | ed States Bankr   | ruptcy Court for the:                      | NORTH                | IERN DISTRICT OF IL   | LINOIS                          |  |                            |         |                   |
| Case<br>(if kno         | e number<br>wn)   |  |                      |   |                                 |  |                            |         | if this is an     |
| ∩ffi                    | cial Form   | 106D                                       |                      |   |                                 |  |                            | G       | .oag              |
|                         |   |  | Who H                | Have Claims   | Secured                         | by Property  | У                          |         | 12/15             |
| numb<br>1. Do<br>[<br>- | er (if known).<br>any creditors ha<br>☑ No. Check th<br>— | ve claims secured by is box and submit the | your proper          | the entries, and attach in  |                                 |  |                            | Š       | me and case       |
|                         |   | l of the information b                     | below.               |   |                                 |  |                            |         |                   |
| Part                    |   | Secured Claims                             |                      |   |                                 | Column A   | Column B                   |         | Column C          |
| for ea                  | ach claim. If more  | than one creditor has                      | a particular o       | e secured claim, list the cr<br>claim, list the other credito<br>ording to the creditor's nar | rs in Part 2. As                | Amount of claim Do not deduct the value of collateral. | Value of co<br>that suppor |         | Unsecured portion |
| 2.1                     | Ford Motor  | Credit                                     | Describe th          | ne property that secures  | the claim:                      | \$21,232.00  |                            | ,950.00 | \$9,282.00        |
|                         | Creditor's Name   |  | 2016 For             | d Fusion 9,800 mil  | es                              |  |                            |         |                   |
|                         | PO Box 542<br>Omaha, NE                                   |  | As of the d apply.   | ate you file, the claim is  | Check all that                  |  |                            |         |                   |
|                         | Number, Street, Cit                                       | y, State & Zip Code                        | Unliquid             |   |                                 |  |                            |         |                   |
| Who                     | owes the debt   | ? Check one.                               | ☐ Disputed Nature of | d<br><b>lien.</b> Check all that apply.   |                                 |  |                            |         |                   |
| <b>■</b> D              | ebtor 1 only  |  | ☐ An agre            | ement you made (such as   | mortgage or secu                | ıred   |                            |         |                   |
| $\square$ D             | ebtor 2 only  |  | car loar             | n)  |                                 |  |                            |         |                   |
| □ D                     | ebtor 1 and Debto   | or 2 only                                  | ☐ Statutor           | y lien (such as tax lien, me  | echanic's lien)                 |  |                            |         |                   |
|                         | t least one of the  | debtors and another                        | ☐ Judame             | nt lien from a lawsuit  |                                 |  |                            |         |                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$21,232.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$21,232.00

Last 4 digits of account number

 $\square$  Other (including a right to offset)

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Check if this claim relates to a community debt

Date debt was incurred

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Page 18 of 47 Document Fill in this information to identify your case: Debtor 1 Aubrey L. Smith Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filina) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount 2.1 \$0.00 \$0.00 Illinois Department of Revenue Last 4 digits of account number \$0.00 Priority Creditor's Name PO Box 64338 When was the debt incurred? Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ■ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **Notice purposes** \$0.00 2.2 \$0.00 **Internal Revenue Service** Last 4 digits of account number \$0.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset?

Official Form 106 E/F

■ No

☐ Yes

**Notice Purposes** 

Other. Specify

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| Part | 2: List All of Your NONPRIORITY Unsecu   | red Claims  |                           |
|------|--|---|---------------------------|
| 3.   | Do any creditors have nonpriority unsecured claim  | s against you?  |                           |
|      | ☐ No. You have nothing to report in this part. Submit                                    | this form to the court with your other schedules.   |                           |
|      | Yes.   |   |                           |
|      |  |   |                           |
| 1    | unsecured claim, list the creditor separately for each cl                                | alphabetical order of the creditor who holds each claim. If a creditor has more that aim. For each claim listed, identify what type of claim it is. Do not list claims already inccreditors in Part 3.If you have more than three nonpriority unsecured claims fill out the | cluded in Part 1. If more |
|      |  |   | Total claim               |
| 4.1  | Bayview Loan Servicing  Nonpriority Creditor's Name                                      | Last 4 digits of account number   | \$41,798.00               |
|      | Ponce De Leon Blvd<br>Miami, FL 33146  | When was the debt incurred?   | _                         |
|      | Number Street City State Zlp Code  Who incurred the debt? Check one.                     | As of the date you file, the claim is: Check all that apply   |                           |
|      | ■ Debtor 1 only  | ☐ Contingent  |                           |
|      | ☐ Debtor 2 only  | □ Unliquidated  |                           |
|      | ☐ Debtor 1 and Debtor 2 only   | □ Disputed  |                           |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |                           |
|      | ☐ Check if this claim is for a community   | ☐ Student loans   |                           |
|      | debt Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                           |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |                           |
|      | ☐ Yes  | Other. Specify  | _                         |
| 4.2  | Caine & Weiner   | Last 4 digits of account number   | \$205.00                  |
|      | Nonpriority Creditor's Name 15025 Oxnard Street Ste. 100                                 | When was the debt incurred?   | _                         |
|      | Van Nuys, CA 91411  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |                           |
|      | Debtor 1 only  | ☐ Contingent  |                           |
|      | ☐ Debtor 2 only  | ☐ Unliquidated  |                           |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |                           |
|      | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |                           |
|      | ☐ Check if this claim is for a community   | ☐ Student loans   |                           |
|      | debt<br>Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                           |
|      | No   | □ Debts to pension or profit-sharing plans, and other similar debts   |                           |
|      | ☐ Yes  | _   |                           |
|      | <b>—</b> 169   | Other Specify   |                           |

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Debtor 1 Aubrey L. Smith Case number (if know) 4.3 **Credence Resource Management** Last 4 digits of account number \$329.00 Nonpriority Creditor's Name PO Box 2300 When was the debt incurred? Southgate, MI 48195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Credit One Bank** Last 4 digits of account number \$1,818.00 Nonpriority Creditor's Name PO Box 98872 When was the debt incurred? Las Vegas, NV 89193-8872 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Dept. of Education \$15,375.00 4.5 Last 4 digits of account number Nonpriority Creditor's Name 123 Justison St. When was the debt incurred? 3rd Floor **Newark, DE 19713** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Student Loans ☐ Yes

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Case number (if know)

|   | <del></del>  |            |
|---|--|------------|
| Nonpriority Creditor's Name 1120 W. Lake Cook Rd. #B  | When was the debt incurred?  |            |
| Buffalo Grove, IL 60089   |  |            |
| Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply  |            |
| Who incurred the debt? Check one.   |  |            |
| ■ Debtor 1 only   | ☐ Contingent   |            |
| ☐ Debtor 2 only   | ☐ Unliquidated   |            |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |            |
| ☐ Check if this claim is for a community  | Student loans  |            |
| debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |            |
| ■ No  | □ Debts to pension or profit-sharing plans, and other similar debts  |            |
| ☐ Yes   |  |            |
| 165   | Other. Specify   |            |
| HOMETOWN CONDOMINIUM  |  |            |
| ASSOCATION NO   | Last 4 digits of account number  | \$1,800.00 |
| Nonpriority Creditor's Name   |  |            |
| c/o: Chat & Prince PC   | When was the debt incurred?  |            |
| 16W343 83rd St<br>Willowbrook, IL 60527   |  |            |
| Number Street City State ZIp Code   | As of the date you file, the claim is: Check all that apply  |            |
| Who incurred the debt? Check one.   |  |            |
| ■ Debtor 1 only   | ☐ Contingent   |            |
| ☐ Debtor 2 only   | ☐ Unliquidated   |            |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |            |
| ☐ Check if this claim is for a community  | ☐ Student loans  |            |
| debt  | lacktriangle Obligations arising out of a separation agreement or divorce that you did not   |            |
| Is the claim subject to offset?   | report as priority claims  |            |
| No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
| Yes   | ■ Other. Specify Homeowners Association  |            |
| Jefferson Conital System  | Last 4 digits of account number  | £2.47.00   |
| Jefferson Capital System Nonpriority Creditor's Name  | Last 4 digits of account number  | \$347.00   |
| 16 McLeland Rd.   | When was the debt incurred?  |            |
| Saint Cloud, MN 56303   |  |            |
| Number Street City State ZIp Code  Who incurred the debt? Check one   | As of the date you file, the claim is: Check all that apply  |            |
| _   | Continuent   |            |
|   | -  |            |
|   |  |            |
|   | •  |            |
|   | <u> </u>   |            |
| ☐ Check if this claim is for a community debt   |  |            |
| Is the claim subject to offset?   | report as priority claims  |            |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|   | Other Specify  |            |
| Who incurred the debt? Check one.  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |

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| Debi | or 1 Aubrey L. Smith   | Case number (if know)   |  |
|------|--|---|--|
| 4.9  | Merchants Credit Guide   | Last 4 digits of account number   | \$7,587.00                                   |
|      | Nonpriority Creditor's Name 223 W. Jackson Blvd Suite 700              | When was the debt incurred?   |  |
|      | Chicago, IL 60606  |   |  |
|      | Number Street City State Zlp Code                                      | As of the date you file, the claim is: Check all that apply   |  |
|      | Who incurred the debt? Check one.                                      |   |  |
|      | ■ Debtor 1 only  | ☐ Contingent  |  |
|      | Debtor 2 only  | ☐ Unliquidated  |  |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |
|      | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |  |
|      | ☐ Check if this claim is for a community                               | ☐ Student loans   |  |
|      | debt Is the claim subject to offset?                                   | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |  |
|      | ■ No   | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                                    |  |
|      | Yes  | Other. Specify  |  |
| 4.1  | Merchants Credit Guide (Original Cr                                    | Last 4 digits of account number   | \$1,973.00                                   |
| 0    | Nonpriority Creditor's Name  |   | <b>*</b> * * * * * * * * * * * * * * * * * * |
|      | 223 W Jackson Blvd<br>Ste 700  | When was the debt incurred?   |  |
|      | Chicago, IL 60606  |   |  |
|      | Number Street City State Zlp Code Who incurred the debt? Check one.    | As of the date you file, the claim is: Check all that apply   |  |
|      | ■ Debtor 1 only  | ☐ Contingent  |  |
|      | ☐ Debtor 2 only  | ☐ Unliquidated  |  |
|      | ☐ Debtor 1 and Debtor 2 only   | Disputed  |  |
|      | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |  |
|      | ☐ Check if this claim is for a community                               | ☐ Student loans   |  |
|      | debt Is the claim subject to offset?                                   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |  |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |  |
|      | □ Yes  | ■ Other. Specify  |  |
| 4.1  |  |   |  |
| 1    | MIDLAND FUNDING  Nonpriority Creditor's Name                           | Last 4 digits of account number   | \$1,818.00                                   |
|      | c/o BLATT HASENMILLER F L<br>125 S WACKER DR #400<br>Chicago, IL 60606 | When was the debt incurred?   |  |
|      | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |  |
|      | Debtor 1 only  | ☐ Contingent  |  |
|      | Debtor 2 only  | ☐ Unliquidated  |  |
|      | ☐ Debtor 1 and Debtor 2 only   | □ Disputed  |  |
|      | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |  |
|      | ☐ Check if this claim is for a community                               | ☐ Student loans   |  |
|      | debt Is the claim subject to offset?                                   | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |  |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |  |
|      | ☐ Yes  | ■ Other. Specify  |  |
|      |  | — Outer. Opeony   |  |

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Case number (if know)

Debtor 1 Aubrey L. Smith

| 4.1 | Navient  | Last 4 digits of account number  | \$67,384.00 |
|-----|--|--|-------------|
|     | Nonpriority Creditor's Name 123 Justison St. 3rd Floor                                     | When was the debt incurred?  |             |
|     | Wilmington, DE 19801  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |             |
|     | Debtor 1 only  | ☐ Contingent   |             |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |             |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |             |
|     | ☐ Check if this claim is for a community   | ☐ Student loans  |             |
|     | debt<br>Is the claim subject to offset?  | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|     | No   | lacksquare Debts to pension or profit-sharing plans, and other similar debts                             |             |
|     | ☐ Yes  | ■ Other. Specify Student Loans   |             |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                    |     |   |     | Total Claim      |
|--------------------|-----|---|-----|------------------|
|                    | 6a. | Domestic support obligations  | 6a. | \$<br>0.00       |
| Total              |     |   |     | <br>_            |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00       |
|                    | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00       |
|                    | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00       |
|                    | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00       |
|                    |     |   |     | Total Claim      |
| Total              | 6f. | Student loans   | 6f. | \$<br>0.00       |
| claims             | 0-  | Obligation wising out of a compation arranged at the t  |     |                  |
| from Part 2        | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00       |
|                    | 6h. | , , ,   | 6h. | \$<br>0.00       |
|                    | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>142,028.00 |
|                    | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>142,028.00 |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Fill in this information to identify your case: |                          |                   |             |  |  |  |  |
|---|--------------------------|-------------------|-------------|--|--|--|--|
| Debtor 1  | Aubrey L. Smith          |                   |             |  |  |  |  |
|   | First Name               | Middle Name       | Last Name   |  |  |  |  |
| Debtor 2  |                          |                   |             |  |  |  |  |
| (Spouse if, filing)                             | First Name               | Middle Name       | Last Name   |  |  |  |  |
| United States Ba                                | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |  |  |  |
| Case number                                     |                          |                   |             |  |  |  |  |
| (if known)                                      |                          |                   |             |  |  |  |  |
|   |                          |                   |             |  |  |  |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 M&M Property Management
649 Madison St.
Oak Park, IL 60304

State what the contract or lease is for
One year written residential lease.

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|                   |  | Docume                         | nt Page 25 o              | of 47  |
|-------------------|--|--------------------------------|---------------------------|--|
| Fill in this      | information to identify your                                       | case:                          |                           |  |
| Debtor 1          | Aubrey L. Smith  |                                |                           |  |
| 20010             | First Name   | Middle Name                    | Last Name                 |  |
| Debtor 2          |  |                                |                           |  |
| (Spouse if, filin | ng) First Name   | Middle Name                    | Last Name                 |  |
| United Stat       | tes Bankruptcy Court for the:                                      | NORTHERN DISTRICT              | OF ILLINOIS               |  |
|                   |  |                                |                           |  |
| Case numb         | oer  |                                |                           | ☐ Check if this is an  |
| ,                 |  |                                |                           | amended filing   |
|                   |  |                                |                           |  |
| Official          | Form 106H  |                                |                           |  |
|                   | ule H: Your Cod  | obtore                         |                           | 40/45  |
| Scried            | ule H. Toul Cou  | EDIOI 2                        |                           | 12/15  |
| 1. Do y           | you have any codebtors? (If  | you are filing a joint case, o | do not list either spouse | e as a codebtor.   |
| ■ No              |  |                                |                           |  |
| ■ No              |  |                                |                           |  |
| □ 162             |  |                                |                           |  |
|                   | nin the last 8 years, have you<br>a, California, Idaho, Louisiana, |                                |                           | ry? (Community property states and territories include ington, and Wisconsin.)   |
| ■ No              | Go to line 3.  |                                |                           |  |
|                   | . Did your spouse, former spou                                     | use, or legal equivalent live  | with you at the time?     |  |
|                   | . Dia your opodoo, formor opod                                     | ioo, or logar oquivalent live  | , with you at the time.   |  |
| in line<br>Form 1 | 2 again as a codebtor only i                                       | f that person is a guaran      | tor or cosigner. Make     | r if your spouse is filing with you. List the person show<br>sure you have listed the creditor on Schedule D (Offici<br>06G). Use Schedule D, Schedule E/F, or Schedule G to |
|                   | Column 1: Your codebtor  |                                |                           | Column 2: The creditor to whom you owe the debt  |
| V                 | Name, Number, Street, City, State and ZI                           | P Code                         |                           | Check all schedules that apply:  |
| 3.1               |  |                                |                           | ☐ Schedule D, line   |
|                   | Name   |                                |                           | ☐ Schedule E/F, line   |
|                   |  |                                |                           | ☐ Schedule G, line   |
| _                 |  |                                |                           |  |
|                   | Number Street<br>City  | State                          | ZIP Code                  |  |
| ,                 | City   | State                          | ZIF Code                  |  |
|                   |  |                                |                           | Doublette D. Free  |
| 3.2               | Name   |                                |                           | Schedule D, line   |
| '                 |  |                                |                           | ☐ Schedule E/F, line   |
|                   |  |                                |                           | ☐ Schedule G, line   |
|                   | Number Street  |                                |                           | <u> </u>   |
| (                 | City   | State                          | ZIP Code                  |  |

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| Fill        | in this information to identify   | vour cas              | e:                           |                                  |            |      | I           |                                  |                          |                                  |          |
|-------------|---|-----------------------|------------------------------|----------------------------------|------------|------|-------------|----------------------------------|--------------------------|----------------------------------|----------|
|             |   | y L. Sm               |                              |                                  |            |      |             |                                  |                          |                                  |          |
| _           | btor 2  Duse, if filing)  |                       |                              |                                  |            | _    |             |                                  |                          |                                  |          |
| Uni         | ited States Bankruptcy Court  | for the:              | NORTHERN DISTRIC             | T OF ILLINOIS                    |            |      |             |                                  |                          |                                  |          |
| (If kr      | se number   |                       |                              |                                  |            |      | □ A         |                                  | ed filing<br>ent showing | g postpetition<br>ollowing date: |          |
|             | fficial Form 106l   |                       |                              |                                  |            |      | N           | 1M / DD/ Y                       | YYY                      |                                  |          |
|             | chedule I: Your as complete and accurate a  |                       |                              |                                  |            |      |             |                                  |                          |                                  | 12/15    |
| spo<br>atta | plying correct information. use. If you are separated ar ch a separate sheet to this  Tt 1: Describe Employ  Fill in your employment information. | nd your s<br>form. Or | spouse is not filing wi      | th you, do not inclu             | ude infor  | mati | on about    | your spour<br>your spour<br>your | ouse. If mo<br>known). A | ore space is                     | needed,  |
|             | If you have more than one job, attach a separate page with information about additional employers.  | iob.                  | ■ Employed                   |                                  |            |      | ☐ Empl      |                                  |                          |                                  |          |
|             |   | h                     | Employment status            | ☐ Not employed                   | d          |      |             | □ Not e                          | mployed                  |                                  |          |
|             |   |                       | Occupation                   | School Teache                    | er         |      |             |                                  |                          |                                  |          |
|             | Include part-time, seasonal self-employed work.   | l, or                 | Employer's name              | Chicago Public                   | Schoo      | ls   |             |                                  |                          |                                  |          |
|             | Occupation may include stu<br>or homemaker, if it applies.  |                       | Employer's address           | 42 W. Madison<br>Chicago, IL 606 |            |      |             |                                  |                          |                                  |          |
|             |   |                       | How long employed th         | nere? 4 years                    | s          |      |             | _                                |                          |                                  |          |
| Pai         | rt 2: Give Details Abo  | ut Month              | nly Income                   |                                  |            |      |             |                                  |                          |                                  |          |
|             | imate monthly income as of<br>use unless you are separated  |                       | e you file this form. If $y$ | ou have nothing to               | report for | any  | line, write | e \$0 in the                     | space. Inc               | slude your no                    | n-filing |
|             | ou or your non-filing spouse have space, attach a separate sh   |                       |                              | mbine the information            | on for all | empl | oyers for   | that perso                       | on on the lir            | nes below. If                    | you need |
|             |   |                       |                              |                                  |            |      | For Del     | otor 1                           |                          | otor 2 or<br>ng spouse           |          |
| 2.          | List monthly gross wages deductions). If not paid mo  |                       |                              |                                  | 2.         | \$   | 5           | ,712.86                          | \$                       | N/A                              |          |
| 3.          | Estimate and list monthly   | overtim               | e pay.                       |                                  | 3.         | +\$  |             | 0.00                             | +\$                      | N/A                              |          |
| 4.          | Calculate gross Income.   | Add line              | 2 + line 3.                  |                                  | 4.         | \$   | 5,7         | 12.86                            | \$                       | N/A                              |          |

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| Deb | tor 1                   | Aubrey L. Smith  | -         | (          | Case       | number (if kn | own) |   |                 |        |                |                 |
|-----|-------------------------|--|-----------|------------|------------|---------------|------|---|-----------------|--------|----------------|-----------------|
|     |                         |  |           |            | Foi        | r Debtor 1    |      |   | For Dek         |        |                |                 |
|     | Сор                     | y line 4 here  | 4.        |            | \$         | 5,712         | .86  | _ | \$              | iig sp | N/A            |                 |
| 5.  | l ist                   | all payroll deductions:  |           |            |            |               |      |   |                 |        |                |                 |
| J.  | 5a.                     | Tax, Medicare, and Social Security deductions  | 5a        |            | \$         | 1 212         | 06   |   | \$              |        | N/A            |                 |
|     | 5a.<br>5b.              | Mandatory contributions for retirement plans   | 5b        |            | \$<br>_    | 1,312<br>319  |      |   | \$              |        | N/A            | _               |
|     | 5c.                     | Voluntary contributions for retirement plans   | 5c        |            | \$<br>-    |               | .00  |   | \$              |        | N/A            | _               |
|     | 5d.                     | Required repayments of retirement fund loans   | 5d        |            | \$         |               | .00  |   | \$              |        | N/A            | _               |
|     | 5e.                     | Insurance  | 5e        |            | \$         | 193           |      |   | \$              |        | N/A            | _               |
|     | 5f.                     | Domestic support obligations   | 5f.       |            | \$         |               | .00  |   | \$              |        | N/A            | _               |
|     | 5g.                     | Union dues   | 5g        | <b>]</b> . | \$         | 108           |      |   | \$              |        | N/A            | _               |
|     | 5h.                     | Other deductions. Specify:   | 5h        |            | \$         |               | .00  | + | \$              |        | N/A            | _               |
| 6.  | Add                     | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | _<br>6.   |            | \$         | 1,934         | .94  |   | \$              |        | N/A            | -               |
| 7.  | Cald                    | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.        |            | \$         | 3,777         |      |   | \$              |        | N/A            | _               |
| 8.  | <b>List</b> 8a. 8b. 8c. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent | 8a<br>8b  |            | \$_<br>\$_ |               | .00  |   | \$<br>          |        | N/A<br>N/A     | _               |
|     | 00.                     | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 80        | <b>)</b> . | \$_        | 0             | .00  |   | \$              |        | N/A            | _               |
|     | 8d.                     | Unemployment compensation  | 80        | d.         | \$         | 0             | .00  |   | \$              |        | N/A            | _               |
|     | 8e.                     | Social Security  | 8e        | €.         | \$_        | 0             | .00  |   | \$              |        | N/A            | _               |
|     | 8f.<br>8g.              | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income   | 8f.<br>8g | J.         | \$_<br>\$_ | 0             | .00  |   | \$<br>\$        |        | N/A<br>N/A     | _               |
|     | 8h.                     | Other monthly income. Specify:   | _ 8h      | 1.+        | \$_        | 0             | .00  | + | \$              |        | N/A            | _               |
| 9.  | Add                     | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.        | 5          | \$         | 0             | .00  |   | \$              |        | N/             | A               |
| 10. |                         | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.       | \$_        |            | 3,777.92      | + \$ |   | N               | 1/A    | = \$           | 3,777.92        |
| 11. | Stat<br>Inclu           | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a   | depe      |            |            | •             |      |   | ∣in <i>Sche</i> | edule  |                | 0.00            |
| 12. |                         | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines   |           |            |            |               |      |   | fit             | 12.    | \$             | 3,777.92        |
| 13. | Do y                    | vou expect an increase or decrease within the year after you file this form.  No.  Yes Explain:  | ?         |            |            |               |      |   |                 |        | Combi<br>month | ned<br>y income |

Official Form 106I Schedule I: Your Income page 2

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| Fill       | in this informa                 | tion to identify y                                   | our case:      |   |  | 1            |   |   |
|------------|---------------------------------|--|----------------|---|--|--------------|---|---|
| Deb        |                                 | Aubrey L. S  |                |   |  | Che          | eck if this is:   |   |
|            | tor 2<br>buse, if filing)       |  |                |   |  |              | An amended filing<br>A supplement show<br>13 expenses as of | wing postpetition chapter the following date: |
| ` '        |                                 | ruptcy Court for the                                 | : NORTH        | HERN DISTRICT OF ILLIN  | OIS                                    |              | MM / DD / YYYY  |   |
|            |                                 | uptoy Court for the                                  | . 1101111      | ILINA DIGITALOT OF ILLIA  |  |              | WINT, BB, TTTT  |   |
|            | e number<br>nown)               |  |                |   |  |              |   |   |
|            |                                 | rm 106J  | _              |   |  |              |   |   |
|            |                                 | J: Your  |                |   | o filing together b                    | oth are equ  | ually racponaible fo  | 12/15   |
| info       | rmation. If m                   |  | eded, atta     | . If two married people ar<br>ich another sheet to this i<br>n. |  |              |   |   |
| Pari       | t 1: Descr                      | ibe Your House                                       | ehold          |   |  |              |   |   |
| ١.         | No. Go to                       |  |                |   |  |              |   |   |
|            |                                 |  | in a separ     | ate household?  |  |              |   |   |
|            | □ N<br>□ Y                      | -  | st file Offici | al Form 106J-2, <i>Expenses</i>                                 | for Separate House                     | ehold of Del | btor 2.   |   |
| 2.         | Do vou have                     | e dependents?  | ■ No           |   |  |              |   |   |
|            | Do not list D<br>Debtor 2.      | •  | ☐ Yes.         | Fill out this information for each dependent                    | Dependent's relat<br>Debtor 1 or Debto |              | Dependent's age   | Does dependent live with you?                 |
|            | Do not state                    |  |                |   |  |              |   | □ No  |
|            | dependents                      | names.   |                |   |  |              |   | □ Yes<br>□ No                                 |
|            |                                 |  |                |   |  |              |   | ☐ Yes   |
|            |                                 |  |                |   |  |              | _   | □ No  |
|            |                                 |  |                |   |  |              |   | ☐ Yes   |
|            |                                 |  |                |   |  |              |   | □ No<br>□ Yes                                 |
| 3.         | expenses o                      | oenses include<br>f people other t<br>d your depende | :han 👝         | No<br>Yes   |  |              |   | <b>=</b> 100                                  |
| Par        | t 2: Estim                      | ate Your Ongoi                                       | ina Month      | v Expenses  |  |              |   |   |
| Est<br>exp | imate your ex                   | penses as of y                                       | our bankr      | uptcy filing date unless y<br>y is filed. If this is a supp     |  |              |   |   |
| Incl       | ude expense                     | s paid for with                                      | non-cash       | government assistance it  | you know                               |              |   |   |
|            | value of sucl<br>ficial Form 10 |  | d have ind     | cluded it on <i>Schedule I:</i> Y                               | our Income                             |              | Your exp  | enses   |
| 4.         |                                 | or home owners<br>and any rent for th                |                | ses for your residence. In<br>or lot.                           | nclude first mortgag                   | e<br>4.      | \$  | 1,105.00                                      |
|            | If not includ                   | led in line 4:                                       |                |   |  |              |   |   |
|            | 4a. Real e                      | estate taxes   |                |   |  | 4a.          | \$  | 0.00  |
|            |                                 | rty, homeowner'                                      |                |   |  | 4b.          | ·   | 0.00  |
|            |                                 | maintenance, re<br>owner's associa                   |                | upkeep expenses   |  | 4c.<br>4d.   |   | 0.00  |
| 5.         |                                 |  |                | our residence, such as ho                                       | me equity loans                        | 4u.<br>5.    | ·   | 0.00  |

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| Debtor 1 |         | Aubrey L. Smith   | Case num | ber (if known)      |                            |
|----------|---------|---|----------|---------------------|----------------------------|
| 6.       | Utiliti | es:   |          |                     |                            |
|          | 6a.     | Electricity, heat, natural gas  | 6a.      | \$                  | 250.00                     |
|          | 6b.     | Water, sewer, garbage collection  | 6b.      | \$                  | 0.00                       |
|          | 6c.     | Telephone, cell phone, Internet, satellite, and cable services  | 6c.      | \$                  | 300.00                     |
|          | 6d.     | Other. Specify:   | 6d.      | \$                  | 0.00                       |
| 7.       | Food    | and housekeeping supplies   |          | \$                  | 500.00                     |
|          |         | care and children's education costs   | 8.       | \$                  | 0.00                       |
|          |         | ing, laundry, and dry cleaning  | 9.       | \$                  | 150.00                     |
|          |         | onal care products and services   | 10.      | \$                  | 150.00                     |
|          |         | cal and dental expenses   | 11.      | ·                   | 350.00                     |
|          |         | sportation. Include gas, maintenance, bus or train fare.  |          |                     |                            |
|          |         | ot include car payments.  | 12.      | \$                  | 350.00                     |
| 13.      |         | tainment, clubs, recreation, newspapers, magazines, and books   | 13.      | \$                  | 50.00                      |
| 14.      | Char    | itable contributions and religious donations  | 14.      | \$                  | 0.00                       |
| 15.      | Insur   | ance.   |          |                     |                            |
|          | Do no   | ot include insurance deducted from your pay or included in lines 4 or 20.   |          |                     |                            |
|          | 15a.    | Life insurance  | 15a.     | \$                  | 0.00                       |
|          | 15b.    | Health insurance  | 15b.     | \$                  | 0.00                       |
|          | 15c.    | Vehicle insurance   | 15c.     | \$                  | 135.00                     |
|          | 15d.    | Other insurance. Specify:   | 15d.     | \$                  | 0.00                       |
| 16.      | Taxe    | s. Do not include taxes deducted from your pay or included in lines 4 or 20.  |          |                     |                            |
|          | Spec    | ify:  | 16.      | \$                  | 0.00                       |
|          |         | Ilment or lease payments:   |          |                     |                            |
|          |         | Car payments for Vehicle 1  | 17a.     | ·                   | 388.00                     |
|          | 17b.    | Car payments for Vehicle 2  | 17b.     | \$                  | 0.00                       |
|          | 17c.    | Other. Specify:   | 17c.     | \$                  | 0.00                       |
|          | 17d.    | Other. Specify:   | 17d.     | \$                  | 0.00                       |
|          |         | payments of alimony, maintenance, and support that you did not report as  |          | •                   | 0.00                       |
|          |         | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.      | · ·                 | 0.00                       |
| 19.      |         | r payments you make to support others who do not live with you.   |          | \$                  | 0.00                       |
|          | Spec    | ·   | 19.      | _                   |                            |
|          |         | r real property expenses not included in lines 4 or 5 of this form or on Scheo  |          |                     | 0.00                       |
|          |         | Mortgages on other property   | 20a.     |                     | 0.00                       |
|          |         | Real estate taxes   | 20b.     |                     | 0.00                       |
|          |         | Property, homeowner's, or renter's insurance  | 20c.     |                     | 0.00                       |
|          |         | Maintenance, repair, and upkeep expenses  | 20d.     | ·                   | 0.00                       |
|          |         | Homeowner's association or condominium dues   | 20e.     | ·                   | 0.00                       |
| 21.      | Othe    | r: Specify:   | 21.      | +\$                 | 0.00                       |
| 22       | Calci   | ulate your monthly expenses   |          |                     |                            |
|          |         | Add lines 4 through 21.   |          | \$                  | 3,728.00                   |
|          |         | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |          | \$                  | 3,720.00                   |
|          |         | 77 37   |          | · -                 | 2 700 00                   |
|          | 22C. /  | Add line 22a and 22b. The result is your monthly expenses.  |          | \$                  | 3,728.00                   |
| 23.      | Calc    | ulate your monthly net income.  |          |                     |                            |
|          |         | Copy line 12 (your combined monthly income) from Schedule I.  | 23a.     | \$                  | 3,777.92                   |
|          |         | Copy your monthly expenses from line 22c above.   | 23b.     | -\$                 | 3,728.00                   |
|          | -       |   |          |                     |                            |
|          | 23c.    | Subtract your monthly expenses from your monthly income.  |          |                     |                            |
|          |         | The result is your monthly net income.  | 23c.     | \$                  | 49.92                      |
|          | _       |   |          |                     |                            |
|          |         | ou expect an increase or decrease in your expenses within the year after you  |          |                     |                            |
|          |         | cample, do you expect to finish paying for your car loan within the year or do you expect your it cation to the terms of your mortgage? | mortgage | payment to increase | e or decrease because of a |
|          |         |   |          |                     |                            |
|          | ■ No    |   |          |                     |                            |
|          | □ Ye    | es. Explain here:   |          |                     |                            |

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| Fill in this info               |  |                          |                           |                          |  |
|---------------------------------|--|--------------------------|---------------------------|--------------------------|--|
|                                 | rmation to identify your                           | case:                    |                           |                          |  |
| Debtor 1                        | Aubrey L. Smith                                    |                          |                           |                          |  |
|                                 | First Name   | Middle Name              | Last Name                 |                          |  |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name              | Last Name                 |                          |  |
| (Opodoc II, IIIIIg)             | riotrano   | Wildelle Hame            | Lastivamo                 |                          |  |
| United States B                 | ankruptcy Court for the:                           | NORTHERN DISTRIC         | T OF ILLINOIS             |                          |  |
| Case number                     |  |                          |                           |                          |  |
| (if known)                      |  |                          |                           |                          | ☐ Check if this is an  |
|                                 |  |                          |                           |                          | amended filing   |
| You must file th                |  | le bankruptcy schedule   | s or amended schedule     | s. Making a false stater | nent, concealing property, or<br>, or imprisonment for up to 20        |
| Sig                             | gn Below   |                          |                           |                          |  |
| Did you pa                      | ay or agree to pay some                            | one who is NOT an atto   | rney to help you fill out | bankruptcy forms?        |  |
| ■ No                            |  |                          |                           |                          |  |
| ☐ Yes.                          | Name of person                                     |                          |                           |                          | uptcy Petition Preparer's Notice,<br>and Signature (Official Form 119) |
|                                 | alty of perjury, I declare<br>re true and correct. | that I have read the sun | nmary and schedules fil   | ed with this declaration | n and  |
| X /s/ Au                        | brey L. Smith                                      |                          | x                         |                          |  |
| Aubre                           | y L. Smith   |                          | Signature o               | of Debtor 2              |  |
| Signatu                         | ure of Debtor 1                                    |                          |                           |                          |  |
| Date                            | September 1, 2017                                  |                          | Date                      |                          |  |

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| Fill in this in                 | formation to identify you                       | r case:  |   |   |   |  |  |
|---------------------------------|---|--|---|---|---|--|--|
| Debtor 1                        | Aubrey L. Smith                                 |  |   |   |   |  |  |
|                                 | First Name                                      | Middle Name  | Last Name   |   |   |  |  |
| Debtor 2<br>(Spouse if, filing) | First Name                                      | Middle Name  | Last Name   |   |   |  |  |
|                                 |   |  |   |   |   |  |  |
| United States                   | Bankruptcy Court for the:                       | NORTHERN DISTRICT C  | OF ILLINOIS   |   |   |  |  |
| Case number<br>(if known)       |   |  |   | -   | Check if this is an amended filing                    |  |  |
| Stateme                         |   | Affairs for Indivio  |   | Bankruptcy<br>equally responsible for sup                       | 4/10  |  |  |
| information.<br>number (if kn   | If more space is needed, own). Answer every que | attach a separate sheet to   | this form. On the top of an                           | y additional pages, write you                                   |   |  |  |
| 1. What is y                    | our current marital statu                       | ıs?  |   |   |   |  |  |
| ☐ Married                       |   |  |   |   |   |  |  |
| ■ Not                           | married   |  |   |   |   |  |  |
| 2. During th                    | ne last 3 years, have you                       | lived anywhere other than  | where you live now?                                   |   |   |  |  |
| □ No                            |   |  |   |   |   |  |  |
| _                               | . List all of the places you I                  | ived in the last 3 years. Do no  | ot include where you live now                         | V.  |   |  |  |
|                                 | 1 Prior Address:                                | Dates Debtor 1   | Debtor 2 Prior A                                      |   | Dates Debtor 2  |  |  |
| Debtoi                          | i Filoi Addiess.                                | lived there  | Deptor 2 Filor A                                      | Jul 635.  | lived there   |  |  |
| -                               | ur Seasons Blvd.<br>, IL 60504                  | From-To:<br><b>8/2003 to 08/2</b>  | ☐ Same as Debtor                                      | 1   | ☐ Same as Debtor 1<br>From-To:                        |  |  |
| states and tern  No Yes.        | <i>ritori</i> es include Arizona, Ca            | lifornia, Idaho, Louisiana, Ner<br>hedule H: Your Codebtors (Of                              | vada, New Mexico, Puerto R                            | nity property state or territor<br>ico, Texas, Washington and V |   |  |  |
| Fill in the                     | total amount of income yo                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including par                         |   | ndar years?   |  |  |
| □ No<br>■ Yes                   | . Fill in the details.                          |  |   |   |   |  |  |
|                                 |   | Debtor 1   |   | Debtor 2  |   |  |  |
|                                 |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                      | Gross income<br>(before deductions<br>and exclusions) |  |  |
|                                 | y 1 of current year until filed for bankruptcy: | ■ Wages, commissions, bonuses, tips  | \$16,978.00   | ☐ Wages, commissions, bonuses, tips                             |   |  |  |
|                                 |   | ☐ Operating a business   |   | ☐ Operating a business  |   |  |  |

Official Form 107

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Case 17-26494 Desc Main Document Page 32 of 47 Case number (if known) Debtor 1 Aubrey L. Smith Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$50,934.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$57,501.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** each source (before deductions Describe below. Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

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Case number (if known) Debtor 1 Aubrey L. Smith Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimonv. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **HOMETOWN CONDOMINIUM** Forcible Entry and **Kane County Circuit Court** □ Pending ASSOCATION NO v. Aubrey L. Detainer ☐ On appeal Smith Concluded 16-LM-001035 Bayview Loan Servicing v. Aubrey **Foreclosure Kane County Circuit Court** □ Pending L. Smith, et al. □ On appeal 15-CH-001286 Concluded **Deficiency Judgment** 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened Bayview Loan Servicing** 622 Four Seasons Blvd. 03/06/17 \$118,000.00 Ponce De Leon Blvd Aurora, IL 60504

Miami, FL 33146

☐ Property was attached, seized or levied.

□ Property was repossessed.■ Property was foreclosed.□ Property was garnished.

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| Dei | Aubrey L. Smith   | Case Humber (il known)   |   |                          |  |  |  |  |  |  |
|-----|---|--|---|--------------------------|--|--|--|--|--|--|
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be  No  Yes. Fill in the details.   | uptcy, did any creditor, including a bank or financial ir<br>cause you owed a debt?  | nstitution, set off any a                       | amounts from your        |  |  |  |  |  |  |
|     | Creditor Name and Address   | Describe the action the creditor took  | Date action was                                 | Amoun                    |  |  |  |  |  |  |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  | tcy, was any of your property in the possession of an another official?  | assignee for the bene                           | efit of creditors, a     |  |  |  |  |  |  |
|     | ☐ Yes   |  |   |                          |  |  |  |  |  |  |
| Par | t 5: List Certain Gifts and Contributions   | <u> </u>   |   |                          |  |  |  |  |  |  |
| 13. | Within 2 years before you filed for bankru  ■ No  □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person   | ptcy, did you give any gifts with a total value of more  Describe the gifts  | than \$600 per person  Dates you gave the gifts | ?<br>Value               |  |  |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:   |  |   |                          |  |  |  |  |  |  |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No Yes. Fill in the details for each gift or contribution. |  |   |                          |  |  |  |  |  |  |
|     | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)   | ŕ  | Dates you contributed                           | Value                    |  |  |  |  |  |  |
| Par | t 6: List Certain Losses  |  |   |                          |  |  |  |  |  |  |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaste or gambling?   |  |   |                          |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |   |                          |  |  |  |  |  |  |
|     | how the loss occurred   | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss                               | Value of property<br>los |  |  |  |  |  |  |
| Par | t 7: List Certain Payments or Transfers   |  |   |                          |  |  |  |  |  |  |
| 16. | consulted about seeking bankruptcy or p   | etcy, did you or anyone else acting on your behalf pay<br>reparing a bankruptcy petition?<br>eparers, or credit counseling agencies for services require     |   | rty to anyone you        |  |  |  |  |  |  |
|     | □ No  |  |   |                          |  |  |  |  |  |  |
|     | Yes. Fill in the details.   |  |   |                          |  |  |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo  | Description and value of any property transferred  | Date payment<br>or transfer was<br>made         | Amount o<br>paymen       |  |  |  |  |  |  |
|     | Chad M. Hayward<br>50 S Main<br>Ste. 200<br>Naperville, IL 60540  | Attorney Fees  | 4/25/17   | \$500.00                 |  |  |  |  |  |  |

ch@haywardlawoffices.com

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Debtor 1 Aubrey L. Smith

| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16. |  |                              |                 |   |   |  |  |  |  |
|-----|---|--|------------------------------|-----------------|---|---|--|--|--|--|
|     | ■ No □ Yes. Fill in the details.  |  |                              |                 |   |   |  |  |  |  |
|     | Person Who Was Paid<br>Address  | Description and v transferred  | alue of any prope            | erty            | Date payment or transfer was made                       | Amount of payment                             |  |  |  |  |
| 18. | Within 2 years before you filed for bankruptc transferred in the ordinary course of your bu Include both outright transfers and transfers macinclude gifts and transfers that you have already  No  | siness or financial affa<br>de as security (such as t                    | nirs?<br>he granting of a se |                 |   |   |  |  |  |  |
|     | Yes. Fill in the details.   | ☐ Yes. Fill in the details.  |                              |                 |   |   |  |  |  |  |
|     | Person Who Received Transfer<br>Address   |  | property transferred pay     |                 | any property or<br>s received or debts<br>schange       | Date transfer was made                        |  |  |  |  |
|     | Person's relationship to you  | Person's relationship to you   |                              |                 |   |   |  |  |  |  |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No ☐ Yes. Fill in the details.  |  | y property to a se           | elf-settled tro | ust or similar device o                                 | f which you are a                             |  |  |  |  |
|     | Name of trust   | Description and v  | alue of the prope            | erty transferr  | red   | Date Transfer was made                        |  |  |  |  |
| Par | 8: List of Certain Financial Accounts, Inst   | truments, Safe Deposit   | Boxes, and Stor              | age Units       |   |   |  |  |  |  |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ  No Yes. Fill in the details.  | other financial accour   | nts; certificates o          | f deposit; sh   |   |   |  |  |  |  |
|     |   | Last 4 digits of account number  | Type of accoun instrument    | clo<br>mo       | ate account was<br>osed, sold,<br>oved, or<br>ansferred | Last balance<br>before closing or<br>transfer |  |  |  |  |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables?  | ear before you filed for   | bankruptcy, any              | safe deposi     | it box or other deposit                                 | ory for securities,                           |  |  |  |  |
|     | Yes. Fill in the details.   |  |                              |                 |   |   |  |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)            |                              | escribe the     | contents  | Do you still have it?                         |  |  |  |  |
| 22. | Have you stored property in a storage unit or   | place other than your  | home within 1 ye             | ear before yo   | ou filed for bankruptcy                                 | ?   |  |  |  |  |
|     | ■ No  |  |                              |                 |   |   |  |  |  |  |
|     | Yes. Fill in the details.   |  |                              |                 |   |   |  |  |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or h<br>to it?<br>Address (Number, S<br>State and ZIP Code) | -                            | escribe the     | contents  | Do you still have it?                         |  |  |  |  |

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Debtor 1 Aubrey L. Smith

| Par | t 9: Identify Property You Hold or Control for  | Someone Else  |         |                                      |                       |  |  |  |  |
|-----|---|---|---------|--------------------------------------|-----------------------|--|--|--|--|
| 23. | Do you hold or control any property that some for someone.  | one else owns? Include any prope  | rty yo  | u borrowed from, are storing fo      | r, or hold in trust   |  |  |  |  |
|     | No  |   |         |                                      |                       |  |  |  |  |
|     | Yes. Fill in the details.   |   |         |                                      |                       |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Des     | cribe the property                   | Value                 |  |  |  |  |
| Par | t 10: Give Details About Environmental Inform   | ation   |         |                                      |                       |  |  |  |  |
| For | the purpose of Part 10, the following definitions   | apply:  |         |                                      |                       |  |  |  |  |
|     | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. |   |         |                                      |                       |  |  |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal  |   | law, v  | whether you now own, operate,        | or utilize it or used |  |  |  |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or   |   | s was   | te, hazardous substance, toxic       | substance,            |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that y   | ou know about, regardless of whe  | n they  | occurred.                            |                       |  |  |  |  |
| 24. | Has any governmental unit notified you that yo  | u may be liable or potentially liable   | e unde  | er or in violation of an environm    | ental law?            |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |         |                                      |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)   |         | Environmental law, if you know it    | Date of notice        |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?   |   |         |                                      |                       |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |         |                                      |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)   |         | Environmental law, if you<br>know it | Date of notice        |  |  |  |  |
| 26. | Have you been a party in any judicial or admini   | strative proceeding under any env   | rironm  | ental law? Include settlements       | and orders.           |  |  |  |  |
|     | ■ No  |   |         |                                      |                       |  |  |  |  |
|     | ☐ Yes. Fill in the details.   |   |         |                                      |                       |  |  |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Natu    | ure of the case                      | Status of the case    |  |  |  |  |
| Par | t 11: Give Details About Your Business or Cor   | nnections to Any Business   |         |                                      |                       |  |  |  |  |
|     | Within 4 years before you filed for bankruptcy.   |   | nv of t | he following connections to an       | v business?           |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a   | •   | •       | J                                    | y zuomoco.            |  |  |  |  |
|     | _   |   |         | •                                    |                       |  |  |  |  |
|     | <ul><li>☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)</li><li>☐ A partner in a partnership</li></ul>   |   |         |                                      |                       |  |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation  |   |         |                                      |                       |  |  |  |  |
|     | _   | An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation |         |                                      |                       |  |  |  |  |

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Case number (if known)

|            | ■ No. None of the above applies. Go to F   | Part 12.                                      |  |  |  |  |  |  |
|------------|--|---|--|--|--|--|--|--|
|            | Yes. Check all that apply above and fill in the details below for each business.   |   |  |  |  |  |  |  |
|            | Business Name<br>Address   | Describe the nature of the business           | Employer Identification number Do not include Social Security number or ITIN.                                      |  |  |  |  |  |
|            | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper              | Dates business existed   |  |  |  |  |  |
| 28.        | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |   |  |  |  |  |  |  |
|            | ■ No<br>□ Yes. Fill in the details below.  |   |  |  |  |  |  |  |
|            | Name<br>Address<br>(Number, Street, City, State and ZIP Code)  | Date Issued                                   |  |  |  |  |  |  |
| Par        | 12: Sign Below   |   |  |  |  |  |  |  |
| are with   |  | false statement, concealing property, or o    | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both. |  |  |  |  |  |
|            | Aubrey L. Smith  |   |  |  |  |  |  |  |
|            | orey L. Smith<br>nature of Debtor 1  | Signature of Debtor 2                         |  |  |  |  |  |  |
| Dat        | September 1, 2017  | Date  |  |  |  |  |  |  |
| Did<br>■ N | <u>*</u>   | nt of Financial Affairs for Individuals Filir | ng for Bankruptcy (Official Form 107)?   |  |  |  |  |  |
| Did<br>■ N | rou pay or agree to pay someone who is not   | an attorney to help you fill out bankrupto    | ey forms?  |  |  |  |  |  |
|            | •  | otcy Petition Preparer's Notice, Declaration, | and Signature (Official Form 119).   |  |  |  |  |  |

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| Fill in this informa            | tion to identify your o                     | case:                 |   |   |
|---------------------------------|---|-----------------------|---|---|
| Debtor 1                        | Aubrey L. Smith                             |                       |   |   |
|                                 | First Name                                  | Middle Name           | Last Name   | _   |
| Debtor 2<br>(Spouse if, filing) | First Name                                  | Middle Name           | Last Name   | _   |
| United States Bank              | ruptcy Court for the:                       | NORTHERN DIST         | RICT OF ILLINOIS  |   |
| Case number                     |   |                       |   | _   |
| (if known)                      |   |                       |   | ☐ Check if this is an                                       |
|                                 |   |                       |   | amended filing  |
| 000 : 15                        | 100   |                       |   |   |
| Official Forr                   |   | :                     |   |   |
| Statement                       | of Intentio                                 | n for Indiv           | iduals Filing Under Cha   | apter 7 12/15   |
| If you are an individ           | dual filing under chap                      | oter 7, you must fill | out this form if:   |   |
|                                 | laims secured by yo                         |                       |   |   |
|                                 | l personal property a                       |                       | ot expired.<br>you file your bankruptcy petition or by the c  | late set for the meeting of creditors                       |
|                                 | r is earlier, unless th                     |                       | e time for cause. You must also send copies   |   |
|                                 | ole are filing together<br>date the form.   | in a joint case, bot  | h are equally responsible for supplying cor   | rect information. Both debtors must                         |
|                                 | d accurate as possib<br>r name and case nun |                       | needed, attach a separate sheet to this for   | m. On the top of any additional pages,                      |
| Part 1: List You                | r Creditors Who Have                        | Secured Claims        |   |   |
|                                 |   |                       | Creditore Who Hove Claims Secured by Dr   | constru (Official Form 100D) fill in the                    |
| information belo                | w.  |                       | Creditors Who Have Claims Secured by Pr   |   |
| Identify the credi              | tor and the property the                    | nat is collateral     | What do you intend to do with the proper secures a debt?  | ty that Did you claim the property as exempt on Schedule C? |
|                                 |   |                       |   |   |
| Creditor's For                  | d Motor Credit                              |                       | ☐ Surrender the property.   | □ No  |
| name:                           |   |                       | Retain the property and redeem it.  | <b>-</b>  |
| Description of                  | 2016 Ford Fusion 9                          | 9,800 miles           | Retain the property and enter into a<br>Reaffirmation Agreement.  | ■ Yes   |
| property                        |   |                       | Retain the property and [explain]:  |   |
| securing debt:                  |   |                       |   |   |
|                                 | r Unexpired Personal                        |                       |   |   |
| in the information I            | below. Do not list rea                      | l estate leases. Une  | n Schedule G: Executory Contracts and Un<br>expired leases are leases that are still in eff<br>he trustee does not assume it. 11 U.S.C. § 3 | ect; the lease period has not yet ended.                    |
| Describe your une               | expired personal prop                       | perty leases          |   | Will the lease be assumed?                                  |
| Lessor's name:                  | MOM Dramarty                                | Managamant            |   | П.,,  |
| Lessoi s name.                  | M&M Property                                | Management            |   | □ No  |
|                                 |   |                       |   | ■ Yes   |
| Description of lease            | ed One year writt                           | en residential lea    | 20  |   |
| Property:                       | - One year writt                            | on residential lea    | <del>.</del>  |   |
|                                 |   |                       |   |   |
| Part 3: Sign Bel                | ow  |                       |   |   |

Official Form 108

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| Deb | otor 1          | Aubrey L. Smith                                      | Case number (if known)  |
|-----|-----------------|--|---|
|     |                 |  | ted my intention about any property of my estate that secures a debt and any personal |
| Х   | •               | t is subject to an unexpired lease.<br>brey L. Smith | X   |
|     | Aubrey L. Smith |  | Signature of Debtor 2   |
|     | Signatu         | ure of Debtor 1                                      |   |
|     | Date            | September 1, 2017                                    | Date  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$75       | administrative fee |  |
| + \$1      | trustee surcharge  |  |
| \$335      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-26494 Doc 1 Filed 09/01/17 Entered 09/01/17 17:35:04 Desc Main Document Page 44 of 47

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

| In r | e Aubrey L. Smith   |  | Case No                 |                           |              |
|------|---|--|-------------------------|---------------------------|--------------|
|      |   | Debtor(s)  | Chapter                 | 7                         |              |
|      |   | OF COMPENSATION OF ATTO  |                         | ` ,                       |              |
| 1.   | compensation paid to me within one ye   | d. Bankr. P. 2016(b), I certify that I am the atternal before the filing of the petition in bankrupt in contemplation of or in connection with the base. | cy, or agreed to be pai | d to me, for services re  |              |
|      |   | o accept   |                         | 2,132.00                  |              |
|      | Prior to the filing of this statemen  | I have received  | \$                      | 500.00                    |              |
|      | Balance Due   |  | \$                      | 1,632.00                  |              |
| 2.   | The source of the compensation paid to  | me was:  |                         |                           |              |
|      | ■ Debtor □ Other (spec  | rify):   |                         |                           |              |
| 3.   | The source of compensation to be paid   | to me is:  |                         |                           |              |
|      | ■ Debtor □ Other (spec  | rify):   |                         |                           |              |
| 4.   | ■ I have not agreed to share the above  | I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.                 |                         |                           |              |
|      |   | sclosed compensation with a person or person<br>th a list of the names of the people sharing in  |                         |                           | aw firm. A   |
| 5.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: |  |                         |                           |              |
|      |   | n, schedules, statement of affairs and plan wh   |                         | o file a petition in bank | ruptcy;      |
| 6.   | By agreement with the debtor(s), the al   | ove-disclosed fee does not include the follow  | ing service:            |                           |              |
|      |   | CERTIFICATION  |                         |                           |              |
| this | I certify that the foregoing is a complete bankruptcy proceeding.   | e statement of any agreement or arrangement  | for payment to me for   | representation of the o   | lebtor(s) in |
|      | September 1, 2017   | /s/ Chad M. Ha   | yward                   |                           |              |
| Date |   | Chad M. Haywa<br>Signature of Attor  |                         |                           |              |
|      |   | Chad M. Haywa  |                         |                           |              |
|      |   | 50 S Main<br>Ste. 200  |                         |                           |              |
|      |   | Naperville, IL 6   | 0540                    |                           |              |
|      |   |  | Fax: 312-867-3647       |                           |              |
|      |   | <u>ch@haywardla</u><br>Name of law firm  |                         |                           |              |

## **United States Bankruptcy Court Northern District of Illinois**

|       |  | Northern District of Inmois                             |                   |                           |
|-------|--|---|-------------------|---------------------------|
| In re | Aubrey L. Smith                            |   | Case No.          |                           |
|       |  | Debtor(s)   | Chapter           | 7                         |
|       | VE   | ERIFICATION OF CREDITOR M                               |                   |                           |
|       |  | Number of   | f Creditors:      | 16                        |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of credi                | itors is true and | correct to the best of my |
| Date: | September 1, 2017                          | /s/ Aubrey L. Smith Aubrey L. Smith Signature of Debtor |                   |                           |

Bayview Loan Servicing Ponce De Leon Blvd Miami, FL 33146

Caine & Weiner 15025 Oxnard Street Ste. 100 Van Nuys, CA 91411

Credence Resource Management PO Box 2300 Southqate, MI 48195

Credit One Bank PO Box 98872 Las Vegas, NV 89193-8872

Dept. of Education 123 Justison St. 3rd Floor Newark, DE 19713

Equable Ascent Financial 1120 W. Lake Cook Rd. #B
Buffalo Grove, IL 60089

Ford Motor Credit PO Box 542000 Omaha, NE 68154

HOMETOWN CONDOMINIUM ASSOCATION NO c/o: Chat & Prince PC 16W343 83rd St Willowbrook, IL 60527

Illinois Department of Revenue PO Box 64338 Chicago, IL 60664

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Jefferson Capital System 16 McLeland Rd. Saint Cloud, MN 56303

M&M Property Management 649 Madison St.
Oak Park, IL 60304

Merchants Credit Guide 223 W. Jackson Blvd Suite 700 Chicago, IL 60606

Merchants Credit Guide (Original Cr 223 W Jackson Blvd Ste 700 Chicago, IL 60606

MIDLAND FUNDING c/o BLATT HASENMILLER F L 125 S WACKER DR #400 Chicago, IL 60606

Navient 123 Justison St. 3rd Floor Wilmington, DE 19801